

Juan B. Soto Law Offices PSC

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VIA CERTIFIED MAIL

September 7, 2023

Commander
US Coast Guard
Legal Service Command Norfolk
Claims Division
300 East Main Street
Suite 400
Norfolk, VA 23510-9100

NOTICE OF CLAIMS

**Re: Samuel Rosario Beltrán
The Estate of Carlos Lico Rosario Beltrán**

Dear Sir or Madame:

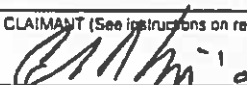
Enclosed please find separate Standard Forms 95, Claim for Injury against the United States Coast Guard, submitted on behalf of Claimants Samuel Rosario Beltrán and the Estate of Carlos Lico Rosario Beltrán, for injuries and wrongful death sustained on August 8, 2022.

On 8 August, 2022 the Claimants Samuel Rosario Beltran and Carlos Lico Rosario Beltran were on board vessel *Desakata*, while doing commercial fishing. At appx. 1411, the CGC *Winslow Griesser* collided with the *Desakata*, approximately four nautical miles north of Dorado, Puerto Rico. The *Winslow Griesser* failed to maintain a proper lookout and failed to maintain safe speed. Both negligent actions would have prevented the collision. As a direct result of such negligence, *Desakata* crew member Carlos Lico Rosario Beltran suffered fatal injuries that caused his death. *Desakata* operator Samuel Rosario Beltrán suffered serious physical injuries and developed a Post Traumatic Stress Disorder (PTSD). The *Desakata* vessel resulted in total loss.

Should you have any questions, please do not hesitate to contact us.

Cordially,
Juan B. Soto Law Offices PSC


Carlos F. López, ESQ.

CLAIM FOR DAMAGE, INJURY, OR DEATH		INSTRUCTIONS: Please read carefully the instructions on the reverse side and supply information requested on both sides of this form. Use additional sheet(s) if necessary. See reverse side for additional instructions.		FORM APPROVED OMB NO 1105-0008	
1 Submit to Appropriate Federal Agency Commander US Coast Guard, Legal Service Command Norfolk, Claims Division, 300 East Main Street, Suite 400 Norfolk, VA 23510-9100			2 Name, address of claimant, and claimant's personal representative if any (See instructions on reverse) Number, Street, City, State and Zip code Claimant: Samuel Rosario Beltran Attorneys: Juan B. Soto Law Offices, P.S.C. 1353 Ave. Luis Vigoreaux, PMB 270 Guaynabo, PR 00966		
3 TYPE OF EMPLOYMENT <input type="checkbox"/> MILITARY <input checked="" type="checkbox"/> CIVILIAN	4 DATE OF BIRTH 01/19/1983	5 MARITAL STATUS Married	6 DATE AND DAY OF ACCIDENT 08/08/2022	7 TIME (A.M. OR P.M.) Appx. 2:11 pm	
8 BASIS OF CLAIM (State in detail the known facts and circumstances attending the damage, injury, or death, identifying persons and property involved, the place of occurrence and the cause thereof. Use additional pages if necessary.) On 8 August 2022 the Claimant, Samuel Rosario Beltran, was on board and Operator of the Desakata, a 1977 23 foot in-length Robalo Center Console, along with crew member and brother Carlos Lico Rosario Beltran while doing commercial fishing. At appx. 1411, the CGC Winslow Griesser, a Sentinel Class 154-foot Fast Response Cutter, collided with the Desakata, approximately four nautical miles north of Dorado, Puerto Rico. The Winslow Griesser failed to maintain a proper lookout (Rule 105 COLREGS) and a safe speed (Rule 6). Both negligent actions would have prevented the collision. See attached document.					
9 PROPERTY DAMAGE					
NAME AND ADDRESS OF OWNER, IF OTHER THAN CLAIMANT (Number, Street, City, State and Zip Code) Samuel Rosario Beltran, Parcelas Nuevas, Calle 1 #74, Vega Alta, PR 00692					
BRIEFLY DESCRIBE THE PROPERTY, NATURE AND EXTENT OF THE DAMAGE AND THE LOCATION OF WHERE THE PROPERTY MAY BE INSPECTED (See instructions on reverse side) Desakata, 1977 23 foot in-length Robalo Center Console, OB 2 Yamaha 115 HP (2022). Unavailable for inspection					
10 PERSONAL INJURY/WRONGFUL DEATH					
STATE THE NATURE AND EXTENT OF EACH INJURY OR CAUSE OF DEATH WHICH FORMS THE BASIS OF THE CLAIM. IF OTHER THAN CLAIMANT, STATE THE NAME OF THE INJURED PERSON OR DECEDENT. Samuel Rosario Beltran, Carlos Lico Rosario Beltran, deceased. Heirs are Carla Michelle, Carlos Manuel and Manuel Alfredo, all Rosario Pérez.					
11 WITNESSES					
NAME		ADDRESS (Number, Street, City, State and Zip Code)			
Claimant, Samuel Rosario Beltran Coast Guard Personnel at the incident site		c/o Claimant's attorneys c/o United States Coast Guard			
12 (See instructions on reverse) AMOUNT OF CLAIM (in dollars)					
12a PROPERTY DAMAGE \$65,000.00	12b PERSONAL INJURY \$10,000,000.00	12c WRONGFUL DEATH	12d TOTAL (Failure to specify may cause forfeiture of your rights) \$10,065,000.00		
I CERTIFY THAT THE AMOUNT OF CLAIM COVERS ONLY DAMAGES AND INJURIES CAUSED BY THE INCIDENT ABOVE AND AGREE TO ACCEPT SAID AMOUNT IN FULL SATISFACTION AND FINAL SETTLEMENT OF THIS CLAIM.					
13a SIGNATURE OF CLAIMANT (See instructions on reverse side)  SIGNED BY COUNSEL OR BEHALF OF CLAIMANT		13b PHONE NUMBER OF PERSON SIGNING FORM (787) 273-0611		14 DATE OF SIGNATURE 9-7-2023	
CIVIL PENALTY FOR PRESENTING FRAUDULENT CLAIM The claimant is liable to the United States Government for a civil penalty of not less than \$5,000 and not more than \$10,000, plus 3 times the amount of damages sustained by the Government. (See 31 U.S.C. 3729.)		CRIMINAL PENALTY FOR PRESENTING FRAUDULENT CLAIM OR MAKING FALSE STATEMENTS Fine, imprisonment, or both (See 18 U.S.C. 287, 1001.)			

INSURANCE COVERAGE	
In order that subrogation claims may be adjudicated it is essential that the claimant provide the following information regarding the insurance coverage of the vehicle or property	
15. Do you carry accident insurance? <input type="checkbox"/> Yes If yes, give name and address of insurance company (Number, Street, City, State, and Zip Code) and policy number: <input checked="" type="checkbox"/> No	
16. Have you filed a claim with your insurance carrier in this instance, and if so, is it full coverage or deductible? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
17. If deductible, state amount	
18. If a claim has been filed with your carrier, what action has your insurer taken or proposed to take with reference to your claim? (It is necessary that you ascertain these facts.)	
N/A	
19. Do you carry public liability and property damage insurance? <input type="checkbox"/> Yes If yes, give name and address of insurance carrier (Number, Street, City, State, and Zip Code): <input checked="" type="checkbox"/> No	
INSTRUCTIONS	
<p>Claims presented under the Federal Tort Claims Act should be submitted directly to the "appropriate Federal agency" whose employee(s) was involved in the incident. If the incident involves more than one claimant, each claimant should submit a separate claim form.</p> <p style="text-align: center;">Complete all items - Insert the word NONE where applicable.</p> <p>A CLAIM SHALL BE DEEMED TO HAVE BEEN PRESENTED WHEN A FEDERAL AGENCY RECEIVES FROM A CLAIMANT HIS DULY AUTHORIZED AGENT, OR LEGAL REPRESENTATIVE, AN EXECUTED STANDARD FORM 95 OR OTHER WRITTEN NOTIFICATION OF AN INCIDENT, ACCOMPANIED BY A CLAIM FOR MONEY.</p> <p>Failure to completely execute this form or to supply the requested material within two years from the date the claim accrued may render your claim invalid. A claim is deemed presented when it is received by the appropriate agency, not when it is mailed.</p> <p>If instruction is needed in completing this form, the agency listed in item #1 on the reverse side may be contacted. Complete regulations pertaining to claims asserted under the Federal Tort Claims Act can be found in Title 28, Code of Federal Regulations, Part 14. Many agencies have published supplementing regulations. If more than one agency is involved, please state each agency.</p> <p>The claim may be filed by a duly authorized agent or other legal representative, provided evidence satisfactory to the Government is submitted with the claim establishing express authority to act for the claimant. A claim presented by an agent or legal representative must be presented in the name of the claimant. If the claim is signed by the agent or legal representative, it must show the title or legal capacity of the person signing and be accompanied by evidence of his/her authority to present a claim on behalf of the claimant as agent, executor, administrator, parent, guardian or other representative.</p> <p>If claimant intends to file for both personal injury and property damage, the amount for each must be shown in item number 12 of this form.</p>	
<p>DAMAGES - A SUM CERTAIN FOR INJURY TO OR LOSS OF PROPERTY, PERSONAL INJURY, OR DEATH ALLEGED TO HAVE OCCURRED BY REASON OF THE INCIDENT. THE CLAIM MUST BE PRESENTED TO THE APPROPRIATE FEDERAL AGENCY WITHIN TWO YEARS AFTER THE CLAIM ACCRUES.</p> <p>The amount claimed should be substantiated by competent evidence as follows:</p> <p>(a) In support of the claim for personal injury or death, the claimant should submit a written report by the attending physician, showing the nature and extent of the injury, the nature and extent of treatment, the degree of permanent disability if any, the prognosis and the period of hospitalization, or incapacitation, attaching itemized bills for medical hospital or burial expenses actually incurred.</p> <p>(b) In support of claims for damage to property which has been or can be economically repaired, the claimant should submit at least two itemized signed statements or estimates by reliable, disinterested concerns, or, if payment has been made, the itemized signed receipts evidencing payment.</p> <p>(c) In support of claims for damage to property which is not economically repairable, or if the property is lost or destroyed, the claimant should submit statements as to the original cost of the property, the date of purchase, and the value of the property both before and after the accident. Such statements should be by disinterested competent persons, preferably reputable dealers or officials familiar with the type of property damaged, or by two or more competitive bidders, and should be certified as being just and correct.</p> <p>(d) Failure to specify a sum certain will render your claim invalid and may result in forfeiture of your rights.</p>	
PRIVACY ACT NOTICE	
<p>This Notice is provided in accordance with the Privacy Act, 5 U.S.C. 552a(e)(3), and concerns the information requested in the letter to which this Notice is attached.</p> <p>A. Authority The requested information is solicited pursuant to one or more of the following: 5 U.S.C. 301, 28 U.S.C. 501 et seq., 28 U.S.C. 2671 et seq., 28 C.F.R. Part 14.</p> <p>B. Principal Purpose The information requested is to be used in evaluating claims.</p> <p>C. Routine Use See the Notices of Systems of Records for the agency to whom you are submitting this form for this information.</p> <p>D. Effect of Failure to Respond Disclosure is voluntary. However, failure to supply the requested information or to execute the form may render your claim invalid.</p>	
PAPERWORK REDUCTION ACT NOTICE	
<p>This notice is solely for the purpose of the Paperwork Reduction Act, 44 U.S.C. 3501. Public reporting burden for this collection of information is estimated to average 6 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Director, Paperwork Reduction Project, Civil Division, U.S. Department of Justice, Washington, DC 20530 or to the Office of Management and Budget, Do not mail completed forms to these addresses.</p>	

SF 95

Claimant Samuel Rosario Beltran

8. Basis of Claim

On 8 August 2022 the Claimant, Samuel Rosario Beltran, was on board and the Operator of the Desakata, a 1977 23 foot in-length Robalo Center Console, along with crew member and brother Carlos Lico Rosario Beltran, while doing commercial fishing. At appx. 1411, the CGC Winslow Griesser, a Sentinel Class 154-foot Fast Response Cutter, collided with the Desakata, approximately four nautical miles north of Dorado, Puerto Rico. The Winslow Griesser failed to maintain a proper lookout (Rule 105 COLREGS) and failed to maintain safe speed (Rule 6). Both negligent actions would have prevented the collision. As a direct result of such negligence, Desakata crew member Carlos Lico Rosario Beltran suffered fatal injuries that caused his death. Desakata operator Samuel Rosario Beltrán suffered serious physical injuries and developed a Post Traumatic Stress Disorder (PTSD). The Desakata vessel resulted in total loss.

CLAIM FOR DAMAGE, INJURY, OR DEATH		INSTRUCTIONS: Please read carefully the instructions on the reverse side and supply information requested on both sides of this form. Use additional sheet(s) if necessary. See reverse side for additional instructions.		FORM APPROVED OMB NO. 1105-0008	
1. Submit to Appropriate Federal Agency Commander US Coast Guard, Legal Service Command Norfolk, Claims Division, 300 East Main Street, Suite 400 Norfolk, VA 23510-9100			2. Name, address of claimant and claimant's personal representative if any (See instructions on reverse) Number, Street, City, State and Zip code Claimant: Carlos Lico Rosario Beltran Attorneys: Juan B. Soto Law Offices, P.S.C. 1353 Ave. Luis Vigoreaux, PMB 270 Guaynabo, PR 00966		
3. TYPE OF EMPLOYMENT <input type="checkbox"/> MILITARY <input checked="" type="checkbox"/> CIVILIAN	4. DATE OF BIRTH 07/11/1970	5. MARITAL STATUS Single	6. DATE AND DAY OF ACCIDENT 08/08/2022	7. TIME (A.M. OR P.M.) Appx. 2:11 pm	
8. BASIS OF CLAIM (State in detail the known facts and circumstances attending the damage, injury, or death, identifying persons and property involved, the place of occurrence and the cause thereof. Use additional pages if necessary.) On 8 August 2022 the Claimant, Carlos Lico Rosario Beltran, was on board as crew member of the Desakata, a 1977 23 foot in-length Robalo Center Console, along with operator and brother Samuel Rosario Beltran while doing commercial fishing. At appx. 1411, the CGC Winslow Griesser, a Sentinel Class 154-foot Fast Response Cutter, collided with the Desakata, approximately four nautical miles north of Dorado, Puerto Rico. The Winslow Griesser failed to maintain a proper lookout (Rule 105 COLREGS) and a safe speed (Rule 6). Both negligent actions would have prevented the collision. See attached document.					
9. PROPERTY DAMAGE					
NAME AND ADDRESS OF OWNER, IF OTHER THAN CLAIMANT (Number, Street, City, State, and Zip Code) Samuel Rosario Beltran, Parcelas Nuevas, Calle 1 #74, Vega Alta, PR 00692					
BRIEFLY DESCRIBE THE PROPERTY, NATURE AND EXTENT OF THE DAMAGE AND THE LOCATION OF WHERE THE PROPERTY MAY BE INSPECTED (See instructions on reverse side) Desakata, 1977 23 foot in-length Robalo Center Console, OB 2 Yamaha 115 HP (2022). Unavailable for inspection.					
10. PERSONAL INJURY/WRONGFUL DEATH					
STATE THE NATURE AND EXTENT OF EACH INJURY OR CAUSE OF DEATH WHICH FORMS THE BASIS OF THE CLAIM. IF OTHER THAN CLAIMANT, STATE THE NAME OF THE INJURED PERSON OR DECEDENT. Carlos Lico Rosario Beltran, deceased caused by multiple body trauma. Heirs are Carla Michelle, Carlos Manuel and Manuel Alfredo, all Rosario Pérez. Samuel Rosario Beltran					
11. WITNESSES					
NAME		ADDRESS (Number, Street, City, State, and Zip Code)			
Claimant, Samuel Rosario Beltran Coast Guard Personnel at the incident site		c/o Claimant's attorneys c/o United States Coast Guard			
12. (See instructions on reverse) AMOUNT OF CLAIM (in dollars)					
12a. PROPERTY DAMAGE	12b. PERSONAL INJURY	12c. WRONGFUL DEATH		12d. TOTAL (Failure to specify may cause forfeiture of your rights)	
		\$15,000,000.00		\$15,000,000.00	
I CERTIFY THAT THE AMOUNT OF CLAIM COVERS ONLY DAMAGES AND INJURIES CAUSED BY THE INCIDENT ABOVE AND AGREE TO ACCEPT SAID AMOUNT IN FULL SATISFACTION AND FINAL SETTLEMENT OF THIS CLAIM.					
13a. SIGNATURE OF CLAIMANT (See instructions on reverse side) SIGNED BY COUNSEL ON BEHALF OF CLAIMANT		13b. PHONE NUMBER OF PERSON SIGNING FORM (787) 273-0611		14. DATE OF SIGNATURE 9-7-2023	
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15 Do you carry accident insurance? <input type="checkbox"/> Yes If yes, give name and address of insurance company (Number, Street, City, State, and Zip Code) and policy number	<input checked="" type="checkbox"/> No
16 Have you filed a claim with your insurance carrier in this instance, and if so, is it full coverage or deductible? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	17 If deductible, state amount
18 If a claim has been filed with your carrier, what action has your insurer taken or proposed to take with reference to your claim? (It is necessary that you ascertain these facts)	
N/A	
19 Do you carry public liability and property damage insurance? <input type="checkbox"/> Yes If yes, give name and address of insurance carrier (Number, Street, City, State, and Zip Code) <input checked="" type="checkbox"/> No	
INSTRUCTIONS	
<p>Claims presented under the Federal Tort Claims Act should be submitted directly to the "appropriate Federal agency" whose employee(s) was involved in the incident. If the incident involves more than one claimant, each claimant should submit a separate claim form.</p> <p style="text-align: center;">Complete all items - Insert the word NONE where applicable.</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p>A CLAIM SHALL BE DEEMED TO HAVE BEEN PRESENTED WHEN A FEDERAL AGENCY RECEIVES FROM A CLAIMANT, HIS DULY AUTHORIZED AGENT, OR LEGAL REPRESENTATIVE, AN EXECUTED STANDARD FORM 95 OR OTHER WRITTEN NOTIFICATION OF AN INCIDENT, ACCOMPANIED BY A CLAIM FOR MONEY</p> <p>Failure to completely execute this form or to supply the requested material within two years from the date the claim accrued may render your claim invalid. A claim is deemed presented when it is received by the appropriate agency, not when it is mailed.</p> <p>If instruction is needed in completing this form, the agency listed in item #1 on the reverse side may be contacted. Complete regulations pertaining to claims asserted under the Federal Tort Claims Act can be found in Title 28, Code of Federal Regulations, Part 14. Many agencies have published supplementing regulations. If more than one agency is involved, please state each agency.</p> <p>The claim may be filed by a duly authorized agent or other legal representative, provided evidence satisfactory to the Government is submitted with the claim establishing express authority to act for the claimant. A claim presented by an agent or legal representative must be presented in the name of the claimant. If the claim is signed by the agent or legal representative, it must show the title or legal capacity of the person signing and be accompanied by evidence of his/her authority to present a claim on behalf of the claimant as agent, executor, administrator, parent, guardian or other representative.</p> <p>If claimant intends to file for both personal injury and property damage, the amount for each must be shown in item number 12 of this form.</p> </div> <div style="width: 48%;"> <p>DAMAGES IN A SUM CERTAIN FOR INJURY TO OR LOSS OF PROPERTY, PERSONAL INJURY, OR DEATH ALLEGED TO HAVE OCCURRED BY REASON OF THE INCIDENT THE CLAIM MUST BE PRESENTED TO THE APPROPRIATE FEDERAL AGENCY WITHIN TWO YEARS AFTER THE CLAIM ACCRUES.</p> <p>The amount claimed should be substantiated by competent evidence as follows:</p> <p>(a) In support of the claim for personal injury or death, the claimant should submit a written report by the attending physician showing the nature and extent of the injury, the nature and extent of treatment, the degree of permanent disability, if any, the prognosis and the period of hospitalization or incapacitation, attaching itemized bills for medical hospital, or burial expenses actually incurred.</p> <p>(b) In support of claims for damage to property which has been or can be economically repaired, the claimant should submit at least two itemized signed statements or estimates by reliable, disinterested concerns, or if payment has been made, the itemized signed receipts evidencing payment.</p> <p>(c) In support of claims for damage to property which is not economically repairable or if the property is lost or destroyed, the claimant should submit statements as to the original cost of the property, the date of purchase, and the value of the property both before and after the accident. Such statements should be by disinterested competent persons preferably reputable dealers or officials familiar with the type of property damaged or by two or more competitive bidders and should be certified as being just and correct.</p> <p>(d) Failure to specify a sum certain will render your claim invalid and may result in forfeiture of your rights.</p> </div> </div>	
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SF 95

Claimant Samuel Rosario Beltran

8. Basis of Claim

On 8 August 2022 the Claimant, Carlos Lico Rosario Beltran, was on board as crew member of the Desakata, a 1977 23 foot in-length Robalo Center Console, along with operator and brother Samuel Rosario Beltran, while doing commercial fishing. At appx. 1411, the CGC Winslow Griesser, a Sentinel Class 154-foot Fast Response Cutter, collided with the Desakata, approximately four nautical miles north of Dorado, Puerto Rico. The Winslow Griesser failed to maintain a proper lookout (Rule 105 COLREGS) and failed to maintain safe speed (Rule 6). Both negligent actions would have prevented the collision. As a direct result of such negligence, Desakata crew member Carlos Lico Rosario Beltran suffered fatal injuries that caused his death. Desakata operator Samuel Rosario Beltrán suffered serious physical injuries and developed a Post Traumatic Stress Disorder (PTSD). The Desakata vessel resulted in total loss.
